

Fill in this information to identify your case and this filing:

Debtor 1 **MaryAnne Applegate**  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA

Case number 16-18467

☐ Check if this is an amended filing

Official Form 106A/B  
**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1

**1285 Eagle Rd.**

Street address, if available, or other description

**New Hope PA 18938-0000**  
City State ZIP Code

**Bucks**  
County

What is the property? Check all that apply

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☒ Other **Business Property**

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **\$900,000.00**  
Current value of the portion you own? **\$900,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Sole owner**

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

**\$900,000.00**

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☒ No  
☐ Yes

Debtor 1 **MaryAnne Applegate**Case number (if known) **16-18467****4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories***Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories☒ No☐ Yes**5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>****\$0.00****Part 3: Describe Your Personal and Household Items****Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**  
Do not deduct secured claims or exemptions.**6. Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware☐ No☒ Yes. Describe.....**Household goods and furnishings - no single item worth more than \$600.00****\$8,625.00****7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☐ No☒ Yes. Describe.....**Misc. household electronics - no single item worth more than \$600.00****\$2,000.00****8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☒ No☐ Yes. Describe.....**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☐ No☒ Yes. Describe.....**1 Bicycle****\$25.00****1 Kayak****\$25.00****Piano - owned jointly with husband - total value \$2,500.00****\$1,250.00****10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☐ No☒ Yes. Describe.....**1 Glock handgun****\$250.00**

Debtor 1 **MaryAnne Applegate**Case number (if known) **16-18467****11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☒ No☐ Yes. Describe.....**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe.....**Diamond wedding band****\$1,000.00****Diamond earrings****\$500.00****Misc. costume jewelry****\$100.00****13. Non-farm animals***Examples:* Dogs, cats, birds, horses☐ No☒ Yes. Describe.....**Horse - owned jointly with debtor's husband and debtor's son -  
total value \$50,000.00****\$16,500.00****Two dogs****\$0.00****14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information.....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....****\$30,275.00****Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the  
portion you own?  
Do not deduct secured  
claims or exemptions.****16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☐ No☒ Yes.....**Cash****\$60.00****17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.☐ No☒ Yes.....

Institution name:

**17.1. Checking****Citizens Bank #0749****\$270.77**

Debtor 1 MaryAnne ApplegateCase number (if known) 16-18467

- |       |          |  |          |
|-------|----------|--|----------|
| 17.2. | Savings  | Citizens Bank #0008  | \$10.40  |
| 17.3. | Checking | Citizens -#4134 title of account AL-azure Bloodstock, owned by debtor, husband and son | \$31.58  |
| 17.4. | Checking | Citizens Bank #0749  | \$102.22 |
18. **Bonds, mutual funds, or publicly traded stocks**  
*Examples: Bond funds, investment accounts with brokerage firms, money market accounts*  
☐ No  
☒ Yes..... Institution or issuer name:  
Aflac, Inc. - 57.0976 shares \$4,217.80
19. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**  
☐ No  
☒ Yes. Give specific information about them.....  
Name of entity: % of ownership:  
Applegate Wood Floors, Inc. 50 % \$100.00  
Gatewood Floors, LLC 50 % \$0.00
20. **Government and corporate bonds and other negotiable and non-negotiable instruments**  
*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.  
☒ No  
☐ Yes. Give specific information about them  
Issuer name:
21. **Retirement or pension accounts**  
*Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans*  
☒ No  
☐ Yes. List each account separately.  
Type of account: Institution name:
22. **Security deposits and prepayments**  
Your share of all unused deposits you have made so that you may continue service or use from a company  
*Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others*  
☒ No  
☐ Yes. .... Institution name or individual:
23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)  
☒ No  
☐ Yes..... Issuer name and description.
24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**  
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).  
☒ No  
☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):
25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**  
☒ No  
☐ Yes. Give specific information about them...

Debtor 1 **MaryAnne Applegate**Case number (if known) **16-18467****26. Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements☒ No☐ Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses☒ No☐ Yes. Give specific information about them...**Money or property owed to you?****Current value of the portion you own?**  
Do not deduct secured claims or exemptions.**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....**29. Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☒ No☐ Yes. Give specific information.....**30. Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☒ No☐ Yes. Give specific information..**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☐ No☒ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

**Phoenix Life Insurance Company  
policy****\$2,085.98****32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information..**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☐ No☒ Yes. Describe each claim.....**Counterclaim for breach of contract, violation of Federal Real Estate Settlement Procedures Act, and failure to comply with the Pennsylvania Unfair Trade Practices Consumer Protection laws.****Unknown****34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim.....

Debtor 1 **MaryAnne Applegate**Case number (if known) **16-18467****35. Any financial assets you did not already list**

- ☒ No
- ☐ Yes. Give specific information..

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....****\$6,878.75****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**

- ☒ No. Go to Part 6.
- ☐ Yes. Go to line 38.

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**

If you own or have an interest in farmland, list it in Part 1.

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ☒ No. Go to Part 7.
- ☐ Yes. Go to line 47.

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?***Examples: Season tickets, country club membership*

- ☒ No
- ☐ Yes. Give specific information.....

**54. Add the dollar value of all of your entries from Part 7. Write that number here .....****\$0.00****Part 8: List the Totals of Each Part of this Form**

|   |                        |   |
|---|------------------------|---|
| <b>55. Part 1: Total real estate, line 2 .....</b>                      |                        | <b>\$900,000.00</b>                             |
| <b>56. Part 2: Total vehicles, line 5</b>                               | <b>\$0.00</b>          |   |
| <b>57. Part 3: Total personal and household items, line 15</b>          | <b>\$30,275.00</b>     |   |
| <b>58. Part 4: Total financial assets, line 36</b>                      | <b>\$6,878.75</b>      |   |
| <b>59. Part 5: Total business-related property, line 45</b>             | <b>\$0.00</b>          |   |
| <b>60. Part 6: Total farm- and fishing-related property, line 52</b>    | <b>\$0.00</b>          |   |
| <b>61. Part 7: Total other property not listed, line 54</b>             | <b>+</b> <b>\$0.00</b> |   |
| <b>62. Total personal property. Add lines 56 through 61...</b>          | <b>\$37,153.75</b>     | Copy personal property total <b>\$37,153.75</b> |
| <b>63. Total of all property on Schedule A/B. Add line 55 + line 62</b> |                        | <b>\$937,153.75</b>                             |

**Fill in this information to identify your case:**

|   |                                  |             |           |
|---|----------------------------------|-------------|-----------|
| Debtor 1                                | <b>MaryAnne Applegate</b>        |             |           |
|   | First Name                       | Middle Name | Last Name |
| Debtor 2                                |                                  |             |           |
| (Spouse if, filing)                     | First Name                       | Middle Name | Last Name |
| United States Bankruptcy Court for the: | EASTERN DISTRICT OF PENNSYLVANIA |             |           |
| Case number                             | <b>16-18467</b>                  |             |           |
| (if known)                              |                                  |             |           |

☐ Check if this is an amended filing
**Official Form 106C****Schedule C: The Property You Claim as Exempt****4/16**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

| Brief description of the property and line on <i>Schedule A/B</i> that lists this property                              | Current value of the portion you own<br><small>Copy the value from <i>Schedule A/B</i></small> | Amount of the exemption you claim<br><small>Check only one box for each exemption.</small>  | Specific laws that allow exemption |
|---|--|---|------------------------------------|
| <b>Household goods and furnishings - no single item worth more than \$600.00</b><br>Line from <i>Schedule A/B</i> : 6.1 | <b>\$8,625.00</b>  | <input checked="" type="checkbox"/> <b>\$8,625.00</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3)              |
| <b>Misc. household electronics - no single item worth more than \$600.00</b><br>Line from <i>Schedule A/B</i> : 7.1     | <b>\$2,000.00</b>  | <input checked="" type="checkbox"/> <b>\$2,000.00</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3)              |
| <b>1 Bicycle</b><br>Line from <i>Schedule A/B</i> : 9.1   | <b>\$25.00</b>   | <input checked="" type="checkbox"/> <b>\$25.00</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit    | 11 U.S.C. § 522(d)(5)              |
| <b>1 Kayak</b><br>Line from <i>Schedule A/B</i> : 9.2   | <b>\$25.00</b>   | <input checked="" type="checkbox"/> <b>\$25.00</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit    | 11 U.S.C. § 522(d)(5)              |
| <b>Piano - owned jointly with husband - total value \$2,500.00</b><br>Line from <i>Schedule A/B</i> : 9.3               | <b>\$1,250.00</b>  | <input checked="" type="checkbox"/> <b>\$1,250.00</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5)              |

Debtor 1 **MaryAnne Applegate**Case number (if known) **16-18467**

| Brief description of the property and line on Schedule A/B that lists this property   | Current value of the portion you own<br>Copy the value from Schedule A/B | Amount of the exemption you claim<br>Check only one box for each exemption.   | Specific laws that allow exemption |
|---|--|---|------------------------------------|
| <b>1 Glock handgun</b><br>Line from Schedule A/B: 10.1  | <b>\$250.00</b>  | <input checked="" type="checkbox"/> <b>\$250.00</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit   | <b>11 U.S.C. § 522(d)(5)</b>       |
| <b>Diamond wedding band</b><br>Line from Schedule A/B: 12.1   | <b>\$1,000.00</b>  | <input checked="" type="checkbox"/> <b>\$1,000.00</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <b>11 U.S.C. § 522(d)(4)</b>       |
| <b>Diamond earrings</b><br>Line from Schedule A/B: 12.2   | <b>\$500.00</b>  | <input checked="" type="checkbox"/> <b>\$500.00</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit   | <b>11 U.S.C. § 522(d)(4)</b>       |
| <b>Misc. costume jewelry</b><br>Line from Schedule A/B: 12.3  | <b>\$100.00</b>  | <input checked="" type="checkbox"/> <b>\$100.00</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit   | <b>11 U.S.C. § 522(d)(4)</b>       |
| <b>Horse - owned jointly with debtor's husband and debtor's son - total value \$50,000.00</b><br>Line from Schedule A/B: 13.1           | <b>\$16,500.00</b>   | <input checked="" type="checkbox"/> <b>\$6,757.23</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <b>11 U.S.C. § 522(d)(5)</b>       |
| <b>Cash</b><br>Line from Schedule A/B: 16.1   | <b>\$60.00</b>   | <input checked="" type="checkbox"/> <b>\$60.00</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit    | <b>11 U.S.C. § 522(d)(5)</b>       |
| <b>Checking: Citizens Bank #0749</b><br>Line from Schedule A/B: 17.1  | <b>\$270.77</b>  | <input checked="" type="checkbox"/> <b>\$270.77</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit   | <b>11 U.S.C. § 522(d)(5)</b>       |
| <b>Savings: Citizens Bank #0008</b><br>Line from Schedule A/B: 17.2   | <b>\$10.40</b>   | <input checked="" type="checkbox"/> <b>\$10.40</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit    | <b>11 U.S.C. § 522(d)(5)</b>       |
| <b>Checking: Citizens -#4134 title of account AL-azure Bloodstock, owned by debtor, husband and son</b><br>Line from Schedule A/B: 17.3 | <b>\$31.58</b>   | <input checked="" type="checkbox"/> <b>\$31.58</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit    | <b>11 U.S.C. § 522(d)(5)</b>       |
| <b>Checking: Citizens Bank #0749</b><br>Line from Schedule A/B: 17.4  | <b>\$102.22</b>  | <input checked="" type="checkbox"/> <b>\$102.22</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit   | <b>11 U.S.C. § 522(d)(5)</b>       |
| <b>Aflac, Inc. - 57.0976 shares</b><br>Line from Schedule A/B: 18.1   | <b>\$4,217.80</b>  | <input checked="" type="checkbox"/> <b>\$4,217.80</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <b>11 U.S.C. § 522(d)(5)</b>       |
| <b>Applegate Wood Floors, Inc. 50 % ownership</b><br>Line from Schedule A/B: 19.1   | <b>\$100.00</b>  | <input checked="" type="checkbox"/> <b>\$100.00</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit   | <b>11 U.S.C. § 522(d)(5)</b>       |

Debtor 1 **MaryAnne Applegate**

Case number (if known) **16-18467**

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own<br><small>Copy the value from Schedule A/B</small> | Amount of the exemption you claim<br><small>Check only one box for each exemption.</small>  | Specific laws that allow exemption |
|---|---|---|------------------------------------|
| <b>Phoenix Life Insurance Company policy</b><br>Line from Schedule A/B: <b>31.1</b> | <b>\$2,085.98</b>   | <input checked="" type="checkbox"/> <b>\$2,085.98</b><br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <b>11 U.S.C. § 522(d)(8)</b>       |

3. **Are you claiming a homestead exemption of more than \$160,375?**

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

**Fill in this information to identify your case:**

|   |                                  |             |           |
|---|----------------------------------|-------------|-----------|
| Debtor 1                                | <b>MaryAnne Applegate</b>        |             |           |
|   | First Name                       | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         |                                  |             |           |
|   | First Name                       | Middle Name | Last Name |
| United States Bankruptcy Court for the: | EASTERN DISTRICT OF PENNSYLVANIA |             |           |
| Case number<br>(if known)               | 16-18467                         |             |           |

☐ Check if this is an amended filing

**Official Form 106D**

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

**2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

| Column A  | Column B                                     | Column C                    |
|---|--|-----------------------------|
| Amount of claim<br>Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion<br>If any |
| \$246,667.59  | \$900,000.00                                 | \$246,667.59                |

**2.1 Bank of America Home Loans**

Creditor's Name

**P.O. Box 31690  
Tampa, FL 33631**

Number, Street, City, State & Zip Code

**Describe the property that secures the claim:**

**1285 Eagle Rd. New Hope, PA 18938  
Bucks County**

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

**Nature of lien.** Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☒ Other (including a right to offset) **Second Mortgage**

Date debt was incurred

Last 4 digits of account number **0971**

**2.2 Thornewood Farm, LLC**

Creditor's Name

**50 Dunkard Church Rd.  
Stockton, NJ 08559**

Number, Street, City, State & Zip Code

**Describe the property that secures the claim:**

**Horse - owned jointly with debtor's husband and debtor's son - total value \$50,000.00**

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Nature of lien.** Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☒ Other (including a right to offset) **Lien**

Date debt was incurred

Last 4 digits of account number

Debtor 1 **MaryAnne Applegate** Case number (if know) **16-18467**  
 First Name Middle Name Last Name

|   |   |   |                       |                     |                       |
|---|---|---|-----------------------|---------------------|-----------------------|
| 2.3   | <b>U.S. Bank, National Association, Trustee</b><br>Creditor's Name<br><b>of J.P. Morgan Mortgage Trust 2006-A5</b><br><b>c/o Shapiro &amp; DeNardo, LLC</b><br><b>3600 Horizon Drive, Suite 150</b><br><b>King of Prussia, PA 19406</b><br>Number, Street, City, State & Zip Code | Describe the property that secures the claim:<br><div style="border: 1px solid black; padding: 2px;"> <b>1285 Eagle Rd. New Hope, PA 18938 Bucks County</b> </div> As of the date you file, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><br><input type="checkbox"/> Unliquidated<br><input checked="" type="checkbox"/> Disputed | <b>\$1,930,281.64</b> | <b>\$900,000.00</b> | <b>\$1,030,281.64</b> |
| Who owes the debt? Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim relates to a community debt                                     |   |   |                       |                     |                       |
| Nature of lien. Check all that apply.<br><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)<br><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)<br><input type="checkbox"/> Judgment lien from a lawsuit<br><input checked="" type="checkbox"/> Other (including a right to offset) <b>First Mortgage</b> |   |   |                       |                     |                       |
| Date debt was incurred _____ Last 4 digits of account number _____  |   |   |                       |                     |                       |

|  |   |   |               |                     |               |
|--|---|---|---------------|---------------------|---------------|
| 2.4  | <b>Upper Makefield Township Tax Collector</b><br>Creditor's Name<br><b>P.O. Box 475</b><br><b>Washington Crossing, PA 18977</b><br>Number, Street, City, State & Zip Code | Describe the property that secures the claim:<br><div style="border: 1px solid black; padding: 2px;"> <b>1285 Eagle Rd. New Hope, PA 18938 Bucks County</b> </div> As of the date you file, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input checked="" type="checkbox"/> Disputed | <b>\$0.00</b> | <b>\$900,000.00</b> | <b>\$0.00</b> |
| Who owes the debt? Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim relates to a community debt          |   |   |               |                     |               |
| Nature of lien. Check all that apply.<br><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)<br><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)<br><input type="checkbox"/> Judgment lien from a lawsuit<br><input type="checkbox"/> Other (including a right to offset) _____ |   |   |               |                     |               |
| Date debt was incurred _____ Last 4 digits of account number _____   |   |   |               |                     |               |

Add the dollar value of your entries in Column A on this page. Write that number here:  
 If this is the last page of your form, add the dollar value totals from all pages.  
 Write that number here:

|                       |
|-----------------------|
| <b>\$2,190,949.23</b> |
| <b>\$2,190,949.23</b> |

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|                          |  |  |
|--------------------------|--|--|
| <input type="checkbox"/> | Name, Number, Street, City, State & Zip Code<br><b>Ballard Spahr, LLP</b><br><b>1735 Market St., Floor 51</b><br><b>Philadelphia, PA 19103</b> | On which line in Part 1 did you enter the creditor? <b>2.3</b><br><br>Last 4 digits of account number ____ |
|--------------------------|--|--|

**Fill in this information to identify your case:**

|   |                                  |             |           |
|---|----------------------------------|-------------|-----------|
| Debtor 1                                | <b>MaryAnne Applegate</b>        |             |           |
|   | First Name                       | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         |                                  |             |           |
|   | First Name                       | Middle Name | Last Name |
| United States Bankruptcy Court for the: | EASTERN DISTRICT OF PENNSYLVANIA |             |           |
| Case number<br>(if known)               | 16-18467                         |             |           |

☐ Check if this is an amended filing

Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

☒ No. Go to Part 2.

☐ Yes.

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

|     |  |   |   |
|-----|--|---|---|
| 4.1 | <b>Internal Revenue Service</b><br>Nonpriority Creditor's Name<br><b>P.O. Box 7346</b><br><b>Philadelphia, PA 19101</b><br>Number Street City State Zip Code<br><b>Who incurred the debt?</b> Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br><b>Is the claim subject to offset?</b><br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | Last 4 digits of account number _____<br>When was the debt incurred? _____<br><b>As of the date you file, the claim is:</b> Check all that apply<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input checked="" type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify _____ | <b>Total claim</b><br><b>\$125,000.00</b> |
|-----|--|---|---|

Debtor 1 **MaryAnne Applegate**

Case number (if know)

**16-18467**

4.2

**PA Department of Revenue**

Nonpriority Creditor's Name

**Dept. 280946****Attn: Bankruptcy Division****Harrisburg, PA 17128-0946**

Number Street City State Zip Code

**Who incurred the debt?** Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

**\$25,000.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

4.3

**State of NJ, Div. of Taxation**

Nonpriority Creditor's Name

**Bankruptcy Unit****CN 245****Trenton, NJ 08695**

Number Street City State Zip Code

**Who incurred the debt?** Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

**\$10,000.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

4.4

**Upper Makefield Township**

Nonpriority Creditor's Name

**c/o Berkheimer Tax Administration****P.O. Box 905****Bangor, PA 18013**

Number Street City State Zip Code

**Who incurred the debt?** Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

**\$5,000.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 **MaryAnne Applegate**

Case number (if know)

**16-18467****Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                                |   | Total Claim |                      |
|--------------------------------|---|-------------|----------------------|
| Total<br>claims<br>from Part 1 | 6a. Domestic support obligations  | 6a.         | \$ <u>0.00</u>       |
|                                | 6b. Taxes and certain other debts you owe the government  | 6b.         | \$ <u>0.00</u>       |
|                                | 6c. Claims for death or personal injury while you were intoxicated  | 6c.         | \$ <u>0.00</u>       |
|                                | 6d. Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d.         | \$ <u>0.00</u>       |
|                                | 6e. Total Priority. Add lines 6a through 6d.  | 6e.         | \$ <u>0.00</u>       |
| Total<br>claims<br>from Part 2 | 6f. Student loans   | 6f.         | \$ <u>0.00</u>       |
|                                | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.         | \$ <u>0.00</u>       |
|                                | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.         | \$ <u>0.00</u>       |
|                                | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.                              | 6i.         | \$ <u>165,000.00</u> |
|                                | 6j. Total Nonpriority. Add lines 6f through 6i.   | 6j.         | \$ <u>165,000.00</u> |

Fill in this information to identify your case:

Debtor 1 **MaryAnne Applegate**  
First Name Middle Name Last Name

Debtor 2  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **EASTERN DISTRICT OF PENNSYLVANIA**

Case number **16-18467**  
(if known)

☐ Check if this is an amended filing

Official Form 106G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease<br>Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1<br>Name<br><br>Number Street<br><br>City State ZIP Code  |   |
| 2.2<br>Name<br><br>Number Street<br><br>City State ZIP Code  |   |
| 2.3<br>Name<br><br>Number Street<br><br>City State ZIP Code  |   |
| 2.4<br>Name<br><br>Number Street<br><br>City State ZIP Code  |   |
| 2.5<br>Name<br><br>Number Street<br><br>City State ZIP Code  |   |

Fill in this information to identify your case:

|   |                                  |             |           |
|---|----------------------------------|-------------|-----------|
| Debtor 1                                | <b>MaryAnne Applegate</b>        |             |           |
|   | First Name                       | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         |                                  |             |           |
|   | First Name                       | Middle Name | Last Name |
| United States Bankruptcy Court for the: | EASTERN DISTRICT OF PENNSYLVANIA |             |           |
| Case number<br>(if known)               | 16-18467                         |             |           |

☐ Check if this is an amended filing

## Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.

☐ No

☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 Applegate, Brian David  
1285 Eagle Road  
New Hope, PA 18938

☒ Schedule D, line 2.2  
☐ Schedule E/F, line \_\_\_\_\_  
☐ Schedule G \_\_\_\_\_  
Thornewood Farm, LLC

3.2 Applegate, Brian P.  
1285 Eagle Road  
New Hope, PA 18938

☒ Schedule D, line 2.2  
☐ Schedule E/F, line \_\_\_\_\_  
☐ Schedule G \_\_\_\_\_  
Thornewood Farm, LLC

Fill in this information to identify your case:

Debtor 1 MaryAnne Applegate

Debtor 2  
(Spouse, if filing) \_\_\_\_\_

United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA

Case number 16-18467  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

|  |                                 | Debtor 1  | Debtor 2 or non-filing spouse   |
|--|---------------------------------|---|---|
| <b>1. Fill in your employment information.</b><br><br>If you have more than one job, attach a separate page with information about additional employers.<br><br>Include part-time, seasonal, or self-employed work.<br><br>Occupation may include student or homemaker, if it applies. | <b>Employment status</b>        | <input checked="" type="checkbox"/> Employed<br><input type="checkbox"/> Not employed | <input checked="" type="checkbox"/> Employed<br><input type="checkbox"/> Not employed |
|  | <b>Occupation</b>               | <u>Business Owner</u>   | <u>Business Owner</u>   |
|  | <b>Employer's name</b>          | <u>Applegate Wood Floors, Inc.</u>  | <u>Applegate Wood Floors, Inc.</u>  |
|  | <b>Employer's address</b>       | <u>1285 Eagle Road</u><br><u>New Hope, PA 18938</u>                                   | <u>1285 Eagle Road</u><br><u>New Hope, PA 18938</u>                                   |
|  | <b>How long employed there?</b> | <u>28 years</u>   | <u>28 years</u>   |

#### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

|   | For Debtor 1       | For Debtor 2 or non-filing spouse |
|---|--------------------|-----------------------------------|
| 2. <b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. \$ <u>0.00</u>  | \$ <u>0.00</u>                    |
| 3. <b>Estimate and list monthly overtime pay.</b>   | 3. +\$ <u>0.00</u> | +\$ <u>0.00</u>                   |
| 4. <b>Calculate gross income.</b> Add line 2 + line 3.  | 4. \$ <u>0.00</u>  | \$ <u>0.00</u>                    |

Debtor 1 **MaryAnne Applegate**

Case number (if known) **16-18467**

|  | For Debtor 1                    | For Debtor 2 or non-filing spouse |
|--|---------------------------------|-----------------------------------|
| Copy line 4 here   | 4. \$ 0.00                      | \$ 0.00                           |
| <b>5. List all payroll deductions:</b>   |                                 |                                   |
| 5a. Tax, Medicare, and Social Security deductions  | 5a. \$ 0.00                     | \$ 0.00                           |
| 5b. Mandatory contributions for retirement plans   | 5b. \$ 0.00                     | \$ 0.00                           |
| 5c. Voluntary contributions for retirement plans   | 5c. \$ 0.00                     | \$ 0.00                           |
| 5d. Required repayments of retirement fund loans   | 5d. \$ 0.00                     | \$ 0.00                           |
| 5e. Insurance  | 5e. \$ 0.00                     | \$ 0.00                           |
| 5f. Domestic support obligations   | 5f. \$ 0.00                     | \$ 0.00                           |
| 5g. Union dues   | 5g. \$ 0.00                     | \$ 0.00                           |
| 5h. Other deductions. Specify:   | 5h.+ \$ 0.00                    | \$ 0.00                           |
| <b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6. \$ 0.00                      | \$ 0.00                           |
| <b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.  | 7. \$ 0.00                      | \$ 0.00                           |
| <b>8. List all other income regularly received:</b>  |                                 |                                   |
| 8a. Net income from rental property and from operating a business, profession, or farm<br>Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  | 8a. \$ 10,416.66                | \$ 10,416.66                      |
| 8b. Interest and dividends   | 8b. \$ 0.00                     | \$ 0.00                           |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive<br>Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c. \$ 0.00                     | \$ 0.00                           |
| 8d. Unemployment compensation  | 8d. \$ 0.00                     | \$ 0.00                           |
| 8e. Social Security  | 8e. \$ 0.00                     | \$ 0.00                           |
| 8f. Other government assistance that you regularly receive<br>Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.<br>Specify:   | 8f. \$ 0.00                     | \$ 0.00                           |
| 8g. Pension or retirement income   | 8g. \$ 0.00                     | \$ 0.00                           |
| 8h. Other monthly income. Specify:   | 8h.+ \$ 0.00                    | \$ 0.00                           |
| <b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9. \$ 10,416.66                 | \$ 10,416.66                      |
| <b>10. Calculate monthly income.</b> Add line 7 + line 9.<br>Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10. \$ 10,416.66 + \$ 10,416.66 | = \$ 20,833.32                    |
| <b>11. State all other regular contributions to the expenses that you list in Schedule J.</b><br>Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.<br>Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.<br>Specify: |                                 |                                   |
|  | 11. +\$                         | 0.00                              |
| <b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies   | 12. \$                          | 20,833.32                         |
| <b>13. Do you expect an increase or decrease within the year after you file this form?</b>   |                                 |                                   |
| <input checked="" type="checkbox"/> No.<br><input type="checkbox"/> Yes. Explain:  |                                 |                                   |

Fill in this information to identify your case:

Debtor 1 MaryAnne Applegate

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA

Case number 16-18467  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

\_\_\_\_\_  
MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

☒ No. Go to line 2.

☐ Yes. Does Debtor 2 live in a separate household?

☐ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter

31

☐ No

☒ Yes

☐ No

☐ Yes

☐ No

☐ Yes

☐ No

☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☐ Yes ☒ No

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 6,746.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 1,885.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 464.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 100.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 700.00

Debtor 1 **MaryAnne Applegate**

Case number (if known) **16-18467**

|  |  |                  |                  |                  |    |  |    |                  |
|--|--|------------------|------------------|------------------|----|--|----|------------------|
| 6. <b>Utilities:</b>   |  |                  |                  |                  |    |  |    |                  |
| 6a. Electricity, heat, natural gas   | 6a. \$   | <b>985.00</b>    |                  |                  |    |  |    |                  |
| 6b. Water, sewer, garbage collection   | 6b. \$   | <b>100.00</b>    |                  |                  |    |  |    |                  |
| 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c. \$   | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 6d. Other. Specify: _____  | 6d. \$   | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 7. <b>Food and housekeeping supplies</b>   | 7. \$  | <b>900.00</b>    |                  |                  |    |  |    |                  |
| 8. <b>Childcare and children's education costs</b>   | 8. \$  | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 9. <b>Clothing, laundry, and dry cleaning</b>  | 9. \$  | <b>220.00</b>    |                  |                  |    |  |    |                  |
| 10. <b>Personal care products and services</b>   | 10. \$   | <b>200.00</b>    |                  |                  |    |  |    |                  |
| 11. <b>Medical and dental expenses</b>   | 11. \$   | <b>100.00</b>    |                  |                  |    |  |    |                  |
| 12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.<br>Do not include car payments.  | 12. \$   | <b>175.00</b>    |                  |                  |    |  |    |                  |
| 13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>  | 13. \$   | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 14. <b>Charitable contributions and religious donations</b>  | 14. \$   | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 15. <b>Insurance.</b><br>Do not include insurance deducted from your pay or included in lines 4 or 20.   |  |                  |                  |                  |    |  |    |                  |
| 15a. Life insurance  | 15a. \$  | <b>414.00</b>    |                  |                  |    |  |    |                  |
| 15b. Health insurance  | 15b. \$  | <b>2,122.00</b>  |                  |                  |    |  |    |                  |
| 15c. Vehicle insurance   | 15c. \$  | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 15d. Other insurance. Specify: <b>AFLAC</b>  | 15d. \$  | <b>704.00</b>    |                  |                  |    |  |    |                  |
| 16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.<br>Specify: <b>Income taxes</b>  |  |                  |                  |                  |    |  |    |                  |
|  | 16. \$   | <b>3,333.33</b>  |                  |                  |    |  |    |                  |
| 17. <b>Installment or lease payments:</b>  |  |                  |                  |                  |    |  |    |                  |
| 17a. Car payments for Vehicle 1  | 17a. \$  | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 17b. Car payments for Vehicle 2  | 17b. \$  | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 17c. Other. Specify: <b>Horse payment</b>  | 17c. \$  | <b>600.00</b>    |                  |                  |    |  |    |                  |
| 17d. Other. Specify: _____   | 17d. \$  | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>   |  |                  |                  |                  |    |  |    |                  |
|  | 18. \$   | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 19. <b>Other payments you make to support others who do not live with you.</b>   |  |                  |                  |                  |    |  |    |                  |
| Specify: _____   | 19.  | <b>\$ 0.00</b>   |                  |                  |    |  |    |                  |
| 20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>   |  |                  |                  |                  |    |  |    |                  |
| 20a. Mortgages on other property   | 20a. \$  | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 20b. Real estate taxes   | 20b. \$  | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 20c. Property, homeowner's, or renter's insurance  | 20c. \$  | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 20d. Maintenance, repair, and upkeep expenses  | 20d. \$  | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 20e. Homeowner's association or condominium dues   | 20e. \$  | <b>0.00</b>      |                  |                  |    |  |    |                  |
| 21. <b>Other:</b> Specify: <b>Pet food, pet grooming, pet medical</b>  |  |                  |                  |                  |    |  |    |                  |
|  | 21. +\$  | <b>300.00</b>    |                  |                  |    |  |    |                  |
| 22. <b>Calculate your monthly expenses</b>   |  |                  |                  |                  |    |  |    |                  |
| 22a. Add lines 4 through 21.   | <div style="border: 1px solid black; padding: 5px;"> <table border="0"> <tr> <td>\$</td> <td><b>20,048.33</b></td> </tr> <tr> <td>\$</td> <td></td> </tr> <tr> <td>\$</td> <td><b>20,048.33</b></td> </tr> </table> </div> |                  | \$               | <b>20,048.33</b> | \$ |  | \$ | <b>20,048.33</b> |
| \$   |  |                  | <b>20,048.33</b> |                  |    |  |    |                  |
| \$   |  |                  |                  |                  |    |  |    |                  |
| \$   | <b>20,048.33</b>   |                  |                  |                  |    |  |    |                  |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   |  |                  |                  |                  |    |  |    |                  |
| 22c. Add line 22a and 22b. The result is your monthly expenses.  |  |                  |                  |                  |    |  |    |                  |
| 23. <b>Calculate your monthly net income.</b>  |  |                  |                  |                  |    |  |    |                  |
| 23a. Copy line 12 (your combined monthly income) from Schedule I.  | 23a. \$  | <b>20,833.32</b> |                  |                  |    |  |    |                  |
| 23b. Copy your monthly expenses from line 22c above.   | 23b. -\$   | <b>20,048.33</b> |                  |                  |    |  |    |                  |
| 23c. Subtract your monthly expenses from your monthly income.<br>The result is your <i>monthly net income</i> .  |  |                  |                  |                  |    |  |    |                  |
|  | 23c. \$  | <b>784.99</b>    |                  |                  |    |  |    |                  |
| 24. <b>Do you expect an increase or decrease in your expenses within the year after you file this form?</b><br>For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? |  |                  |                  |                  |    |  |    |                  |
| <input checked="" type="checkbox"/> No.  |  |                  |                  |                  |    |  |    |                  |
| <input type="checkbox"/> Yes. <span style="border: 1px solid black; display: inline-block; width: 400px; height: 1.2em; vertical-align: middle;"></span>   |  |                  |                  |                  |    |  |    |                  |